

**FY13 Early Childhood Special Education Allocation Grant  
Fund Code 262  
Online Grant Application Portal**

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## Early Childhood Special Education Allocation (Fund Code 262)

### Introduction

Before completing your **FY13 Early Childhood Special Education (Fund Code 262) Grant Application**, please read the Request for Responses (RFR posted on [EEC's website](#) under Funding Opportunities - Open Renewal Grants - FY13 Early Childhood Special Education Allocation (Fund Code 262)

For assistance with the Early Childhood Special Education On-line-Grant Portal, please contact [Procure](#) or [Evelyn Nellum](#).

**Deadline:**

Your response to the 262 Early Childhood Special Education Allocation Grant and all mailed materials must be received by EEC by **4:00 pm on Thursday August 9, 2012.**

**All applicants must submit their grant application online.**

Please see the RFR for complete submission instructions as they have been revised.

[Continue](#)

## Select Your School Districts Name from the drop down menu

The school districts are listed in alphabetical order.



### Early Childhood Special Education Allocation (Fund Code 262)

**Massachusetts Public School Districts**

Please select your School District from the following list:

--Select One--

--Select One--

Abby Kelley Foster Charter Public (District)

Abington

Acton

Acushnet

Adams-Cheshire

Agawam

Alma del Mar Charter School

Amesbury

Amherst

Andover

Arlington

Ashburnham-Westminster

Ashland

Athol-Royalston

Atlantis Charter (District)

Attleboro

Auburn

Avon

Ayer-Shirley

Barnstable

Bedford

Belchertown

Bellingham

Belmont

Benjamin Banneker Charter Public (District)

Benjamin Franklin Classical Charter Public (District)

Berkley

Berkshire Hills

Berlin

Continue

## Enter your password, and click the submit button.

This password is the same password used to apply for the grant in FY12.

### Enter your password

Please enter your password to access your grant application information :

If you need assistance with your password for the 262 online portal, please send an email to [EEC Procure](#).

If you are a new grantee in FY13 or are applying for these funds for the first time, you will be prompted to create and save a password.

### Create a password

*Please create a password before you answer the on-line grant application. This will enable you to retrieve your grant application and modify your answers later if you wish to do so.*

Enter a password:

Re-enter the password:

## Home Screen

The **Home Screen** has three new pages that must be completed as part of the grant application

- Checklist for Required Grant Application Documents
- Fund Code 262 Cover Page (Part I), and the
- Required Documents Section (Part VII)

From any screen you can return to this page by clicking the word Home at the top of the page



## Early Childhood Special Education Allocation (Fund Code 262)

School District : Alma del Mar Charter School

Steps to Complete the Renewal Application		
<a href="#">View/Edit</a>	Checklist for required Grant Application Documents	✓
<a href="#">View/Edit</a>	Fund Code 262 Cover Page (Part I)	✗
<a href="#">View/Edit</a>	Budget Detail and Narrative (Part II)	✗
<a href="#">View/Edit</a>	Program Information (Part III)	✗
<a href="#">View/Edit</a>	Contact Information (Part IV)	✗
<a href="#">View/Edit</a>	Required Statistical Information (Part V)	✗
<a href="#">View/Edit</a>	262 Schedule A - Consolidated Assignments (Part VI) (If Applicable)	✗
<a href="#">View/Edit</a>	Required Documents (Part VII)	✗

# Checklist for Required Grant Application Documents

## Checklist for Required Grant Application Documents

School District : Your School Districts Name

Checklist for Required Grant Application Documents		
<p><b>Instructions:</b> Indicate with a <b>check mark</b> all items that have been submitted. Assemble and submit the mailed original and hard copy in the order as listed below. All forms are available from within the FY13 Fund Code 262 On-line Portal and posted for your review on EEC's website: <a href="http://www.state.ma.us/eec">www.state.ma.us/eec</a> and on Comm-PASS.</p>		
<b>1. Online Portal</b>		
<b>Applicant use only:</b>	<b>EEC use only:</b>	
<input type="checkbox"/>	<input type="checkbox"/>	<b>Completed FY13 Online Grant Application Portal for Fund Code 262</b>
Within the Fund Code 262 Online Portal the following forms were completed		
<input type="checkbox"/>	<input type="checkbox"/>	Checklist for Required Grant Application Documents (this form)
<input type="checkbox"/>	<input type="checkbox"/>	Fund Code 262 Cover Page (Part I) (Signed Original MUST BE MAILED)
<input type="checkbox"/>	<input type="checkbox"/>	Budget Details and Narrative (Part II)
<input type="checkbox"/>	<input type="checkbox"/>	Required Program Information (Part III)
<input type="checkbox"/>	<input type="checkbox"/>	Contact Information (Part IV)
<input type="checkbox"/>	<input type="checkbox"/>	Statistical Information (Part V)
<input type="checkbox"/>	<input type="checkbox"/>	Schedule A Form (VI) (One (1) Original, Signed by all participating agencies, if applicable - MUST BE MAILED)
<b>Additional Required Application Components (Part VII)</b>		
<b>2. The following documents should be uploaded into the Fund Code 262 Online Portal</b> (For additional information about these required documents, see Appendix E in the RFR.)		
<input type="checkbox"/>	<input type="checkbox"/>	A. Preschool Rate Sheet OR a Statement indicating that Preschool Fees are not collected
<input type="checkbox"/>	<input type="checkbox"/>	B. Preschool Outreach, Selection and Enrollment Procedures and Policies
<input type="checkbox"/>	<input type="checkbox"/>	C. Early Childhood Special Education Transition Protocol or MOU: (if revised during SY 2011-2012).
<b>3. MA Standard Administrative Forms:</b> Complete and mail <u>one original packet</u> of the following forms with Grant Application response <b>unless applicant already has these documents on file with the Commonwealth of MA.</b>		
<input type="checkbox"/>	<input type="checkbox"/>	Commonwealth Terms & Conditions
<input type="checkbox"/>	<input type="checkbox"/>	W-9 with DUNS #
<input type="checkbox"/>	<input type="checkbox"/>	Contractor Authorized Signatory Listing
<input type="checkbox"/>	<input type="checkbox"/>	Authorization for Electronic Funds Payment (EFT) Form
<input type="checkbox"/>	<input type="checkbox"/>	Executive Order 504 Certification
	<input type="checkbox"/>	Fund Code 262 Online Portal Submission Date_____
<input type="checkbox"/>		Mailed One (1) original (all signatures must be in blue ink) and one (1) copy of the documents listed in section 1 and 3 that required submission by mail.
<p><b>To be mailed to:</b>            Department of Early Education and Care            FY2013 Early Childhood Special Education Allocation            Attention: Jessica Fix, Grants Administration            51 Sleeper Street, 4th Floor            Boston, MA 02210</p>		
<div>Save and Print</div> <div>Save and Continue</div> <div>Cancel Save</div>		

## Fund Code 262 Cover Page (Part I)

### Early Childhood Special Education Allocation (Fund Code 262)

#### Part I - Cover Page

School District : Your School Districts Name

##### A. General Information:

**Applicant Name:** Your School Districts Name

**Organization Code:** Organization Code

**Agency Address:**

Address Line 1:

Address Line 2:

City, State, Zip Code:, MA

**Grant Contact Name:**

**Email Address:**

**Phone Number:**

##### B. Application Award Amount Requested

FUND CODE	GRANT NAME	PROJECT DURATION		262 ALLOCATION AMOUNT
262	EARLY CHILDHOOD SPECIAL EDUCATION ALLOCATION	FROM 9/1/2012	TO 8/31/2013	\$517.00
FY13 TOTAL AMOUNT REQUESTED				\$0.00

Save and Print

Save and Continue

## BUDGET DETAIL AND NARRATIVE (Part II)

**If you are using a Schedule A, please assign funds in Part VI before completing the budget section**

Please ensure that all line items where funds are used have a budget narrative that describes how they are aligned with the purpose of the funding. **Budgets with incomplete information will not be approved**

- Please give a brief explanation for each expenditure and how it aligns with the specific activities of the grant.
- Please include the **Number of Staff** and **Number of FTEs** for all staff related line items. FTEs should be the portion of the staffs FTEs that are funded through the grant.
- Provide a breakdown of Staff fringe that includes the **number of Staff** and the type of fringe that funds will be used for, such as: health insurance, life insurance, county retirement program, and unemployment insurance, etc., are appropriate.
- Please state your total fringe benefits.
- For federal grants only, on the MTRS sub-line a budgeted amount equal to 9% of the salaries of those checked on lines 1,2, or 3 as members of MTRS.

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**Early Childhood Special Education Allocation (Fund Code 262)**

**Part II - Budget Detail and Narrative**

School District : Abington

**Grant Program Coordination and Services**

Expenditure Category as it links to the specific activities in the grant	Proposed Expenditures Sep 1, 2012 - Jun 30, 2013 Column A	Proposed Expenditures Jul 1, 2013 - Aug 31, 2013 Column B	Total Grant Budget Column C	# Staff	# FTE	Budget narrative: Please give a brief explanation of expenditure and how it aligns with the specific activities of the grant.
1. Early Childhood inclusive program Director Salary	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
MTRS <input type="text" value="No"/>	\$ <input type="text" value="0.00"/>	\$ <input type="text" value="0.00"/>	\$ <input type="text" value="0.00"/>			<input type="text"/>
2. Early Childhood inclusive program Coordinator Salary	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
MTRS <input type="text" value="No"/>	\$ <input type="text" value="0.00"/>	\$ <input type="text" value="0.00"/>	\$ <input type="text" value="0.00"/>			<input type="text"/>
3. Early Childhood inclusive program Instructional/Professional Staff	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
MTRS <input type="text" value="No"/>	\$ <input type="text" value="0.00"/>	\$ <input type="text" value="0.00"/>	\$ <input type="text" value="0.00"/>			<input type="text"/>
4. Early Childhood inclusive program Support Staff Salaries	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
5. Early Childhood inclusive program Staff Fringe Benefits	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>			<input type="text"/>
6. MTRS <a href="#">Important MTRS Information</a>	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>			<input type="text"/>

7. General Printing/Reproduction	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>			<input type="text"/>
8. Instructional Supplies & Materials	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>			<input type="text"/>
9. Non-Instructional Supplies and Materials	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>			<input type="text"/>
10. Transportation of Students	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>			<input type="text"/>
11. Rental of Space for Early Childhood inclusive program	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>			<input type="text"/>
12. Rental of Equipment	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>			<input type="text"/>
13. Telephone/Utilities for Early Childhood inclusive program	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>			<input type="text"/>
14. Travel	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>			<input type="text"/>
15. Professional Development for Inclusion	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>			<input type="text"/>
Program Coordination and Support Subtotal:	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>			MTRS 80% = \$ MTRS 20% = \$

#### Program Coordination and Services conducted by Subcontractors

Note: Upon budget review, EEC may request additional information of programs with a significant portion of their grant expended via subcontractors.

16. Program Coordination and Support Attributed to Subcontracts	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>			<input type="text"/>
17. Subcontracts for individual consultants/contractors	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>	Rate <input type="text"/>	HRS/Day <input type="text"/>	<input type="text"/>
Subcontract Subtotal	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>			

#### Grant Administration and Oversight

Fiscal Administration and Oversight (May not Exceed ESE's Restricted Rate\*\*\*\*)

19. Total Lead Agency Administrative Costs	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>			<input type="text"/>
20. Total Administration Costs attributed to Subcontracts.	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>			<input type="text"/>
Administration Subtotal	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>			

Grant Total	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>			
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[Save and Continue](#) [Save and Go to Home](#)

**YOU MUST CLICK SAVE AND CONTINUE FOR YOUR BUDGET TO SAVE CHANGES YOU WILL NOT BE ABLE TO CONTINUE IF YOUR BUDGET EXCEEDS YOUR ALLOCATION AMOUNT**



## FY13 - Early Childhood Special Education Allocation (Fund code 262)

### Part III - Program Information

School District: Your School District Name

#### Program Goals and Activities

##### A. Indicator 6 (Inclusion & LRE) Activities and Timeline

###### Topic and Questions

1. Describe how the district will involve early intervention programs, Head Start, community-based programs, and providers in child-specific referrals, transition planning conferences, evaluations and team meetings, as well as, on-going communication to support smooth transitions.

Preschool

Kindergarten

2. When children with disabilities attend community-based programs as part of, or in addition to where their special education and related services are delivered, how will the district /school communicate and share information with community-based programs and providers about:

- children's individual IEP goals and the instructional strategies used
- children's individual developmental and educational progress, including formative and developmental assessment information

Please include the methods and frequency that these activities will be implemented throughout the year.

Preschool

Kindergarten

##### B. Indicator 7 (Measuring Preschool Outcomes) Activities and Timeline

###### Topic and Questions

1. Describe the district's process for developing functional goals and documenting outcomes for preschool children with IEPs. Please include examples of the developmental and formative assessments tools most commonly used within the district to measure children's individual progress to demonstrate children's improved:

- a) social-emotional skills;
- b) acquisition and use of knowledge and skills (including early language/communication and early literacy); and
- c) use of appropriate behaviors to meet their needs.

Preschool

Kindergarten

##### C. Outreach to Children and Families – Child Find - Activities and Timeline –

###### Topic and Questions

1. How will the district, in coordination with its Homeless Education liaison, conduct outreach to families to ensure that young children with disabilities who are homeless and who are in need of special education and related services, are located, identified, and evaluated?

Preschool

Kindergarten

## Part IV - Program Contact Information

### 1. Early Childhood Coordinator Information

Name:	<input type="text"/>		
Mailing Address:	<input type="text"/>		
	<input type="text"/>		
City:	<input type="text"/>	State: <input type="text" value="MA"/>	Zip Code: <input type="text"/>
Phone:	<input type="text"/> (ex: 617-988-6000 or 617-988-6000 x123)		
Fax:	<input type="text"/> (ex: 617-988-6000 or 617-988-6000 x123)		
Email:	<input type="text"/>		

### 2. Lead Agency Contact Information (Special Education Director)

☐ Same as above

Name:	<input type="text"/>		
Mailing Address:	<input type="text"/>		
	<input type="text"/>		
City:	<input type="text"/>	State: <input type="text" value="MA"/>	Zip Code: <input type="text"/>
Phone:	<input type="text"/> (ex: 617-988-6000 or 617-988-6000 x123)		
Fax:	<input type="text"/> (ex: 617-988-6000 or 617-988-6000 x123)		
Email:	<input type="text"/>		

### 3. Superintendent or Executive Director of Lead Agency:

☐ Same as above

Name:	<input type="text" value="Peter Schafer"/>		
Mailing Address:	<input type="text" value="171 Adams St"/>		
	<input type="text"/>		
City:	<input type="text"/>	State: <input type="text"/>	Zip Code: <input type="text"/>
Phone:	<input type="text" value="781-982-2150"/> (ex: 617-988-6000 or 617-988-6000 x123)		
Fax:	<input type="text"/> (ex: 617-988-6000 or 617-988-6000 x123)		
Email:	<input type="text" value="NULL"/>		

### 4. Summer Contact Information

☐ Same as above

Name:	<input type="text"/>		
Mailing Address:	<input type="text"/>		
	<input type="text"/>		
City:	<input type="text"/>	State: <input type="text" value="MA"/>	Zip Code: <input type="text"/>
Phone:	<input type="text"/> (ex: 617-988-6000 or 617-988-6000 x123)		
Fax:	<input type="text"/> (ex: 617-988-6000 or 617-988-6000 x123)		
Email:	<input type="text"/>		

### 5. Fiscal Contact Information

☐ Same as above

Name:	<input type="text"/>		
Mailing Address:	<input type="text"/>		
	<input type="text"/>		
City:	<input type="text"/>	State: <input type="text"/>	Zip Code: <input type="text"/>
Phone:	<input type="text"/> (ex: 617-988-6000 or 617-988-6000 x123)		
Fax:	<input type="text"/> (ex: 617-988-6000 or 617-988-6000 x123)		
Email:	<input type="text"/>		

## FY13 - Early Childhood Special Education Allocation (Fund code 262)

### Part V - Required Statistical Information

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#### Early Childhood Special Education Allocation (Fund Code 262)

##### Part V - Required Statistical Information

School District :

The purpose of the **Early Childhood Special Education Allocation (ECSE) Grant** is to provide funds to school districts and charter school districts to build capacity and to ensure that eligible 3, 4, and 5 year-old children with disabilities are appropriately identified as eligible for special education and receive developmentally appropriate special education and related services designed to meet their individual needs in accordance with the Individuals with Disabilities Education Act - 2004 (IDEA-2004) and Massachusetts Special Education laws and regulations.

All data requested in the following two sections should be based on programmatic information for the **2011-2012 school year**.

Please complete [Part V - Required Statistical Information](#)

School District:

#### A. Inclusion Practices in Preschool

1. Other than Early Intervention (EI), how many preschool- age children (ages 3- to 5- years old) were referred to special education during the 2011-2012 school year: by the following:

- a. Child Care (Head Start, Child Care, and Family Child Care)
- b. Public School Program
- c. Parents
- d. Other

Other Text:

2. How many preschool-aged children who were residing in the district during SY 2011-2012 had IEPs?

3. Of the number provided in question 2, please indicate how many children had an IEP that called for Related Services only.

4. Of the number provided in question 2, indicate how many preschool-age children with IEPs were identified as children that also experienced homelessness during the SY 2011 -2012.

5. For children identified in question 2, please indicate the number of children who received their special education services in the following settings:

- a. Head Start
- b. Child Care Center
- c. Family Child Care
- d. Public School
- e. Home
- f. Other

Other Text:

6. Of the number provided in Question 2, indicate the number of children who were funded partially or totally with voucher or contracted slots.

7. Of the number provided in Question 2, indicate the number of preschool –age children with IEPs who were also identified as ELL/ DLL.

8. Provide the number of early intervention programs in the community that the LEA communicates and collaborates with to support effective transition planning and practice.

## **B. Eligibility in Early Childhood**

9. At the start of the 2011-2012 school year, how many children in the preschool program

- a. did not have IEPs and were age eligible to be in the kindergarten program?
- b. had an IEP and were age eligible to be in the kindergarten program?

10. At the start of the 2011-2012 school year, how many children in the kindergarten program

- a. did not have IEPs and were age eligible to be in the first grade?
- b. had an IEP and were age eligible to be in the first grade?



## Early Childhood Special Education Allocation (Fund Code 262)

### Part VII - Required Documents

School District : Abington

**After browsing the files, select 'Save Information' button at the bottom for uploading attached files to EEC.**

**Respond to the Questions below and upload the following document(s) as required.**

A. Does the school district charge tuition for preschool services for children **without IEPS**? ☐ Yes ☒ No  
**If yes, please attach the program's rate schedule. Click the browse button to select a file from your computer**

B. Please attach your "**Preschool Outreach, Student Selection & Enrollment Policies and Procedures**." Click the browse button to select a file "District Name\_Preschool Enrollment Policy" from your computer

C. Did your school district revise a transition protocol or a MOU with local Early Intervention Program(s) during the last school year (2011-2012)? ☐ Yes ☒ No

**If yes, please attach a copy of the signed and dated transition protocol/MOU. Click the browse button to select a file from your computer**

**The required documents should be uploaded to Part VII as part of your grant Application**

### **MA Standard Administrative Forms (Part VIII)**

Applicants must also complete and mail **one original packet** of the following forms with their Grant Application response (unless applicant already has these documents on file with the Commonwealth of MA)

Please note it is the responsibility of the grantee to ensure that EEC has the most current Administrative forms on record. **In the event that the legal address information on the Fund code 262 Cover Page is not displayed or requires revisions, school districts must submit the documents listed below.**

- [A signed Commonwealth Terms & Conditions form](#)
- [W-9 with DUNS #](#)
- [Contractor Authorized Signatory Listing](#)
- [Authorization for Electronic Funds Payment \(EFT\) Form](#)
- [Executive Order 504 Certification](#)

## MAKE SURE THAT ALL SECTIONS ARE COMPLETED & MARKED ON THE CHECKLIST

### Grant Submission

Click the **Print Summary** button to [Review your Grant Application](#) as a PDF.

**Print Summary**

Please click the **Submit** button when you have completed your grant application and are ready to **submit your application to EEC for grant review**

**Submit**

Fund Code 262 On-line Portal and posted for your review on EEC's website: [www.state.ma.us/eec](http://www.state.ma.us/eec) and on Comm-PASS.

#### 1. Online Portal

Applicant use only:	EEC use only:	
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Completed FY13 Online Grant Application Portal for Fund Code 262
Within the Fund Code 262 Online Portal the following forms were completed		
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Checklist for Required Grant Application Documents (this form)
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Fund Code 262 Cover Page (Part I) (Signed Original MUST BE MAILED)
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Budget Details and Narrative (Part II)
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Required Program Information (Part III)
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Contact Information (Part IV)
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Statistical Information (Part V)
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Schedule A Form (VI) (One (1) Original, Signed by all participating agencies, if applicable - MUST BE MAILED)

#### Additional Required Application Components (Part VII)

##### 2. The following documents should be uploaded into the Fund Code 262 Online Portal

(For additional information about these required documents, see Appendix E in the RFR.)

<input checked="" type="checkbox"/>	<input type="checkbox"/>	A. Preschool Rate Sheet OR a Statement indicating that Preschool Fees are not collected
<input checked="" type="checkbox"/>	<input type="checkbox"/>	B. Preschool Outreach, Selection and Enrollment Procedures and Policies
<input checked="" type="checkbox"/>	<input type="checkbox"/>	C. Early Childhood Special Education Transition Protocol or MOU: (if revised during SY 2011-2012).

#### 3. MA Standard Administrative Forms:

Complete and mail one original packet of the following forms with Grant Application response **unless applicant already has these documents on file with the Commonwealth of MA.**

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<input checked="" type="checkbox"/>	<input type="checkbox"/>	W-9 with DUNS #
<input type="checkbox"/>	<input type="checkbox"/>	Contractor Authorized Signatory Listing
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<input type="checkbox"/>	<input type="checkbox"/>	Executive Order 504 Certification
	<input type="checkbox"/>	Fund Code 262 Online Portal Submission Date _____
<input checked="" type="checkbox"/>		Mailed One (1) original (all signatures must be in blue ink) and one (1) copy of the documents listed in section 1 and 3 that required submission by mail.

To be mailed to:  
Department of Early Education and Care  
FY2013 Early Childhood Special Education Allocation  
Attention: Jessica Fix, Grants Administration  
51 Sleeper Street, 4th Floor  
Boston, MA 02210

Save and Print

Save and Continue

Cancel Save



## Review Your Application before Submitting for Grant Review by Clicking the Print Summary

CLICK THE SUBMIT BUTTON

Home

Log Out

### Early Childhood Special Education Allocation (Fund Code 262)

School District : Abington

#### Thank You

The Department of Early Education and Care (EEC) would like to thank you for completing the online portion of the FY13 Early Childhood Special Education allocation (ESCE) grant application Grant Application.

**To confirm the completion the online portion of this grant application**, an email should be sent to EEC via the following e-mail address: [Procure@massmail.state.ma.us](mailto:Procure@massmail.state.ma.us). Please include the following subject line in the email: **"FY2013 262 Grant Online Submission Confirmation-School District Name"**

#### To be mailed:

Mail One (1) original (all signatures must be in blue ink) and one (1) copy of the documents listed in section 1 and 3 as instructed on **Checklist for Required Grant Application Document** to:

**Department of Early Education and Care  
FY2013 Early Childhood Special Education Allocation  
Attention: Jessica Fix, Grants Administration  
51 Sleeper Street, 4th Floor  
Boston, MA 02210**

[Go to EEC grants page](#)

## Return to the Home Page to Save and Print Your Final Application to Be Signed and Mailed

### MA Standard Administrative Forms (Part VIII)


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- [W-9 with DUNS #](#)
- [Contractor Authorized Signatory Listing](#)
- [Authorization for Electronic Funds Payment \(EFT\) Form](#)
- [Executive Order 504 Certification](#)

File Download

Do you want to open or save this file?




Name: Grant262\_Package\_00010000.pdf  
Type: Adobe Acrobat Document, 283KB  
From: eec-tst-web-v01

Open

Save

Cancel



While files from the Internet can be useful, some files can potentially harm your computer. If you do not trust the source, do not open or save this file. [What's the risk?](#)

### Grant Submission

Click the **Print Summary** button to [Review your Grant Application](#) as a PDF.

Print Summary

Please click the **Submit** button when you have completed your grant application and are ready to **submit your application to EEC for grant review**

Submit

FY13 Fund Code 262

School District : Abington

Instructions: Indicate with a check mark all items that have been submitted. Assemble and submit the mailed original and hard copy in the order as listed below. All forms are available from within the FY13 Fund Code 262 Online Portal and posted for your review on EEC's website: [www.state.ma.us/eeec](http://www.state.ma.us/eeec) and on Comm-PASS.

#### Checklist for Required Grant Application Documents

##### 1. Online Portal

Applicant use only: ☒ EEC use only: ☐ Completed FY13 Online Grant Application Portal for Fund Code 262

Within the Fund Code 262 Online Portal the following forms were completed

<input checked="" type="checkbox"/>	<input type="checkbox"/>	Checklist for Required Grant Application Documents (this form)
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Fund Code 262 Cover Page (Part I) (Signed Original <b>MUST BE MAILED</b> )
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Budget Details and Narrative (Part II)
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Required Program Information (Part III)
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Contact Information (Part IV)
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Statistical Information (Part V)
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Schedule A Form (VI) (One (1) Original, Signed by all participating agencies, if applicable -- <b>MUST BE MAILED</b> )

##### Additional Required Application Components (Part VII)

2. The following documents should be uploaded into the Fund Code 262 Online Portal (For additional information about these required documents, see Appendix E in the RFR.)

<input checked="" type="checkbox"/>	<input type="checkbox"/>	A. Preschool Rate Sheet OR a Statement indicating that Preschool Fees are not collected
<input checked="" type="checkbox"/>	<input type="checkbox"/>	B. Preschool Outreach, Selection and Enrollment Procedures and Policies
<input checked="" type="checkbox"/>	<input type="checkbox"/>	C. Early Childhood Special Education Transition Protocol or MOU: (if revised during SY 2011-2012)

##### 3. MA Standard Administrative Forms:

Complete and mail one original package of the following forms with Grant Application response unless applicant already has these documents on file with the Commonwealth of MA.

<input checked="" type="checkbox"/>	<input type="checkbox"/>	Commonwealth Terms & Conditions
<input checked="" type="checkbox"/>	<input type="checkbox"/>	W-9 with DUNS #
<input type="checkbox"/>	<input type="checkbox"/>	Contractor Authorized Signatory Listing
<input type="checkbox"/>	<input type="checkbox"/>	Authorization for Electronic Funds Payment (EFT) Form
<input type="checkbox"/>	<input type="checkbox"/>	Executive Order 504 Certification
<input type="checkbox"/>	<input type="checkbox"/>	<b>DO not submit additional information/document beyond requested grant application, as these will not be reviewed.</b>

Jun 29 2012  
4:34PM

☒ Fund Code 262 Online Portal Submission Date

Mailed One (1) original (all signatures must be in blue ink) and one (1) copy of the documents listed in section 1 and 3 that required submission by mail.

To be mailed to:  
Department of Early Education and Care  
FY2013 Early Childhood Special Education Allocation  
Attention: Jessica Fox, Grants Administration  
51 Sleeper Street, 4th Floor  
Boston, MA 02210

### PROCUREMENT INFORMATION Early Childhood Special Education Allocation FY13 EEC Grant Fund Code 262

#### Part I. Application Cover Page

##### A. General Information:

Applicant Name: Abington  
Organization Code: 00010000  
Agency Address:  
Address Line 1: 500 GLINIEWICZ WAY  
Address Line 2:  
City, State, Zip Code: ABINGTON, MA 02351

Grant Contact Name: abbing  
Email Address: asas  
Phone Number: asasa

##### B. Application Award Amount Requested

FUND CODE	GRANT NAME	PROJECT DURATION		262 ALLOCATION AMOUNT
		FROM	TO	
262	EARLY CHILDHOOD SPECIAL EDUCATION ALLOCATION	9/1/2012	8/31/2013	\$9,681.00
FY13 TOTAL AMOUNT REQUESTED:				\$0.00

C. I CERTIFY THAT THE INFORMATION CONTAINED IN THIS APPLICATION IS CORRECT AND COMPLETE; THAT THE APPLICANT AGENCY HAS AUTHORIZED ME, AS ITS REPRESENTATIVE, TO FILE THIS APPLICATION; AND THAT I UNDERSTAND THAT FOR ANY FUNDS RECEIVED THROUGH THIS APPLICATION THE AGENCY AGREES TO COMPLY WITH ALL APPLICATION STATE AND FEDERAL GRANT REQUIREMENTS COVERING BOTH THE PROGRAMMATIC AND FISCAL ADMINISTRATION OF GRANT FUNDS.

##### Authorized Applicant Signatory:

(This person must be listed on your Contractor Authorized Signatory Listing Form)

Name: \_\_\_\_\_

X \_\_\_\_\_ Date: \_\_\_\_\_  
(please Print Name, and then sign in blue ink)

Applicant Federal Tax I.D. Number: 00-0000000

Indicate (circle) whether this proposal is:  
Original Copy